BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									09/869397				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY			R THAN	
`	TOTAL CLAIM	TAL CLAIMS				100		RATE	FEE	ー ー			_
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F		\dashv	RATE BASIC FE	177	7
1	OTAL CHARGEABLE CLAIMS		18	9 minus 20=		•			 -	OR	-	JEL	1
INDEPENDENT CLAIMS			10	2 minus 3 =		•		X\$ 9=		OR	X\$18=	 	
MULTIPLE DEPENDENT CLAIM PE								X40=		OR	X80=		
* If the difference in column 1 is les's than zero, enter "0" in column 2								+135=	_	ÖR	+270=		
								TOTAL		OR	TOTAL	SI	_
-	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) (Column 3)								ENTITY	OR	OTHE!	R THAN	フ
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM8 PREVIO PAID F	SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	
	Total	1. 8	Minus	1.00	<u>y</u>	= 0		X\$ 9=		OR	5/2=	Ø	1
	Independent	1. 2 ENTATION OF N	Minus	13		= Ø	•	X40=		1	-2/1/D	Ø	1
Ц.,,	TINOT PRESI	ENTATION OF M	IULTIPLE DE	PENDENT	CLAIM		ŀ	405		OR		9	┨
						•	L	+135= TOTAL		OR	+ 270 =		1
		(Column 1)		(Columi	n 2)	(Column 3)	Al	DOIT. FEE		OR A	TOTAL DDIT. FEE	<u> </u>	$\frac{1}{2}$
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI-: TIONAL FEE		RATE	ADDI:	
	Total	•	Minus	••		₹ 2:		X\$ 9=		OR	X\$18=	FEE	1
	Independent	NTATION OF MI	Minus			=	- -	X40=	ije vi	OR	X80=		1
		William Co.	r	+135=		OR	+270=		1				
							Δ	TOTAL DIT. FEE		OR A	TOTAL		1
7		(Column 1)	Ţ	(Column		(Column 3)				• ^	DDIT. FEE		1
NOMENI	nika i	REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL	ſ	RATE	ADDI- TIONAL	
	Total		Minus	••			1		·FEE	·		FEE	ł
	Independent	•	Minus.	•••		=	L	X\$ 9=		OR	X\$18=		l
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X40=		OR	X80=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
!	the "Highest Num the "Highest Num ne "Highest Numb	ADI	TOTAL DIT. FEE		OR AD	TOTAL DIT. FEE							
		,	. ,			-A-ina-i inniinAt (uund	nı nıə sbb	ropriate box	in colum	n 1.	. ,	